Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR \* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-TIQNAL RATE ADDI-AMENDMENT **AFTER PREVIOUSLY** EXTRA TIONAL MENDMENT PAID FOR Total (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\boldsymbol{\omega}$ REMAINING PRESENT NUMBER

ENT		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		KATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total (37 CFR 1.16(c))	•	Minus		=	]	X \$ =		OR	x \$ ==	
Z	Independent (37 CFR 1.16(b))	•	Minus	***	=	1			1		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						^3=	<del> </del>	OR	× \$=	
	FIRST PRESENT	ATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))	]	+ \$=		OR	+ s =	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
NTC		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL

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ADD'L FEE

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FEE

AMENDMENT PAID FOR FEE Total (37 CFR 1.16(c)) Minus ENDM OR Minus = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

								Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  TEGE 50 200 97											451		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								L E	NTITY	OR	OTHER			
TOTAL CLAIMS 16						RA	TE	FEE	7	RATE	FEE			
FC	R.		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE		İ	
TOTAL CHARGEABLE CLAIMS			/6 minus 20=		. 8		xs	9=		1	X\$18=			
INDEPENDENT CLAIMS				nus 3 =	*	es l	X4:			OR	X86=			
<u> </u>		IDENT CLAIM P						<u> </u>		OR	A00=			
							+14	5=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							ТОТ	AL		OR	TOTAL	770		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	<b>LL</b>	ENTITY	OR	OTHER SMALL		٠	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID I	BER DUSLY	PRESENT EXTRA	RAT	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MOZ	Total	*	Minus	##		=	XS:	9=		OR	X\$18=			
ME	Independent	*	Minus	***		=	X43	}=		OR	X86=			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14			1 i	+290=			
								)TAL		OR	TOTAL			
		(Calumn 4)		(Calor	O	(Caluma 2)	ADDIT.	FEE		OR	ADDIT. FEE			
	(Column 1) (Column 1) (Column 1) (Column 1)								ADDI-	1 1		ADDI-		
AMENDMENT B		REMAINING AFTER AMENDMENT	·	NUME PREVIC PAID I	USLY	PRESENT EXTRA	RAT	Έ	TIONAL FEE		RATE	TIONAL FEE		
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=			
	Independent	*	Minus	***		=	X43	_		OR	X86=			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					·	1 44				.000			
							+145	TAL		OR	+290= TOTAL			
							ADDIT.			OR ,	ADDIT. FEE			
		(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Colum		(Column 3)								
AMENDMENT C		REMAINING AFTER AMENDMENT	-	NUME PREVIO PAID F	BER	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MQ7	Total	•	Minus	**		= .	X\$ 9	_	!	OR	X\$18=			
ME	Independent	*	Minus	***		=	· X43	<u> </u>		OR	X86=			
•	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM			-						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+145			OR	+290=			
** 1	the "Highest Nur	nber Previously Pa	id For IN THIS	S SPACE is	less that	n 20, enter "20."	ADDIT, F		•	OR ,	TOTAL ADDIT. FEE			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														